

Infant Mortality Summit

William C. VanNess II, MD
State Health Commissioner

November 1, 2013



Indiana State
Department of Health

Indiana State Department of Health

- ▶ ISDH Mission:
 - To promote and provide essential public health services
- ▶ ISDH Vision:
 - A healthier and safer Indiana

ISDH– Top Priorities

- ▶ Governor Pence “*Good to Great*” book
- ▶ National Health Rankings has placed Indiana 41st least healthy out of 50 states
- ▶ After extensive review of our priorities, ISDH has named the following public health needs as the top three priorities for Indiana for the next four years:

#1. Reduction in Infant Mortality rates

#2. Reduction in Adult Obesity rates

#3. Reduction in Adult Smoking rates

Good to Great 2013 Top Priorities

- ▶ Reduce Infant Mortality (#1 priority)
 - Defined as the death of a baby before first birthday
 - Infant Mortality Rate (IMR) is the number of infant deaths for every 1,000 live births
- ▶ **Infant Mortality is the #1 indicator of health status in the world!**
- ▶ Indiana:
 - In 2011 (final data) Indiana had 7.7 deaths/1000
 - Indiana is 45th worst out of 51 states (includes DC) in 2011 (preliminary data)
 - IN consistently one of the worst in USA
 - *Indiana only <7.0 once in 113 yrs!!*
 - 6.945 in 2008

What are the general risk factors?

These top five causes account for 57% of all infant deaths in U.S. in 2010

1. *Born with a serious birth defect*
2. *Born too small or too early*
 - Pre-term
 - < 39 weeks
 - Low birth weight infant (LBW)
 - weigh less than 5 lbs 8 ounces (2500 grams) at birth
 - Very low birth weight infant (VLBW)
 - less than 3 pounds, 5 ounces (1500 grams) at birth
3. *Sudden Infant Death Syndrome (SIDS)*
4. *Affected by maternal complications of pregnancy*
 - Diabetes, Hypertension, obesity, etc.
5. *Victims of injuries (e.g., suffocation deaths)*

Indiana top 5 causes of IM in 2011 (643 deaths)

1. Perinatal Risks = 45.7% (294 deaths)
 - Examples include..Pre-term, LBW, VLBW, placental complications, premature rupture of membranes, bacterial sepsis, respiratory conditions, etc.
2. Congenital malformations = 26.3% (169)
3. SIDS/SUIDS/Accidents = 15.6% (95)
 - SIDS = 51
 - accidental suffocations = 28
 - other accidents = 16
4. Assault/Neglect = 1.4%
5. All Other = 11% (71)

Factors in Indiana

- Prematurity & Low Birth Weight Causes

- Smoking (ISDH #3 priority)
 - 16.6% pregnant mothers smoke
 - 30% Medicaid Moms smoke!!!
 - Indiana has 6th highest smoking rate in US
- Obesity (ISDH #2 priority)
 - Obese=25% chance prematurity
 - Morbidly Obese= 33% prematurity
 - Indiana is 8th most obese state in US
- Elective deliveries before 39 weeks gestation

- Racial/Ethnic

- Black IM
 - 2006 was 18.1 deaths/1000
 - 2011 was 12.3 deaths/1000!!
- White IM
 - 2008 was 5.5 deaths/1000
 - 2011 was 6.9 deaths/1000

Factors (Con't)

- Limited Prenatal Care

- Only 68.1% pregnant mothers in Indiana receive PNC in 1st trimester

- Unsafe Sleep (15.6% deaths 2011)

- Socio-economic

- Poverty

- Can affect access to prenatal care.
- Lower income people tend to smoke more which is a leading cause of LBW and prematurity.
- Tend to have less safe sleeping environments which can lead to more suffocations.
 - e.g., co-sleeping with parent

- Limited breastfeeding in Indiana

- Breastfeeding at hospital discharge was 74% in 2011.
- Every day after Mom/Baby leaves the hospital, the number tends to decrease.

PLAN

- ▶ Decrease smoking among pregnant mothers
 - ISDH is partnering with Indiana Medicaid
- ▶ Decrease obesity among pregnant mothers
 - ISDH division of Nutrition & Physical activity
- ▶ “Safe Sleep”
 - *“Back to Sleep”* campaign
 - 1994
 - Reduced SIDS by 50%
 - *“Safe Sleep”* campaign
 - Expansion of “Back to Sleep”
 - Describes actions parents/caregivers can take to reduce the risk of other sleep-related causes of infant death e.g., accidental suffocation
- ▶ “Hard Stop” hospital policies on preventing elective deliveries occurring before 39 weeks
- ▶ Encourage hospitals to become certified as *“Baby Friendly”* by the World Health Organization to increase breastfeeding
- ▶ Certification of OB & NICUs to ensure they meet standards

PLAN (Con't)

- ▶ Analyze data, convert to useful info & distribute back to:
 - Regional partnerships which include the following members:
 - Hospitals, LHDs, CHCs, Minority Health Coalitions, March of Dimes, etc.
 - “Sister” state agencies
 - FSSA, Medicaid, DOE, DCS, etc
- ▶ Learn from areas/regions/states that have been successful in improving their infant mortality
 - Share with regional coalitions
 - e.g., Home Visiting Programs

Thanks

- ▶ Governor Pence
- ▶ Dr. Lakey
- ▶ To our Supporters...who are all are listed in the Summit Program